National Institutes of Health Certification Checklist NIH Manual 1961-9

TR	AVELER:	(Typ	ed of Printed)	
1.	Is the sponsoring organization using Federal Funds to defray the costs of this trip? Yes No (If yes, reimbursement may NOT be accepted)			
2.	Does the offer of travel reimbursement include other compensation from the sponsor in (a) the form of an honorarium, or (b) payment for the travel of family members or (c) payment for travel beyond that allowed under Federal travel regulations? Yes No (If yes at (b), family members travel order # , at (c), justification attached.)			
3.	Is the travel related to official government business as prescribed in Manual Issuance 1961-9 REIMBURSEMENT FOR TRAVEL IN CASH OR IN KIND?			
4.	Yes No Services No Services No			
_				
5.	Why can't this trip be paid with DHHS	funds?		
6.	Is the travel related to the development by the sponsor of a grant or contract proposal for submission to your ICD? Yes No			
7.	Are there current plans for the development of a CRADA with the sponsoring organization? Yes No			
8.	Is the traveler an officer, director, trustee, partner or an employee of the sponsoring organization? Yes No No			
9.	Do you or your spouse or minor child have financial interests or personal business relationships with the sponsoring organization? Yes No No			
10.	0. Do you have any involvement in the review, approval, or monitoring or any active or potential grant, cooperative agreement, or contract (for research, goods, or services) concerning the sponsoring organization? Further, does the acceptance of this sponsorship compromise the ICD or NIH with respect to its policies, procedures, and official positions on issues? Yes No			
11. Is the sponsor involved in any NIH investigations of scientific fraud or misconduct or for any reason been debarred from receipt of government grants, contracts or cooperative agreements? Is the purpose of the travel to participate in an activity involving scientific misconduct issues? If the answer to either question is "yes," please discuss the circumstances with your Executive Officer before proceeding. Yes No				
"Information above is accurate and complete to the best of my knowledge and in accordance with the policy in NIH Manual Chapter 1961-9."				
Tra	veler's certification	Supervisor's Approval	Recommending Official	
Da	te	Date	Date	